UNITED STATES DISTRICT COURT FOR THE DISTRICT OF COLUMBIA

DEM	OCRACY FORWARD FOUNDATIO	ON)
	Plaintiff	
	V.) Civil Action No.
U.S. D	DEPARTMENT OF)
<u>HEAL</u>	TH AND HUMAN SERVICES)
	Defendants)
		SUMMONS IN A CIVIL ACTION
To:	(Defendant's name and address)	U.S. Department of Health and Human Services 200 Independence Avenue, S.W. Washington, D.C. 20201
	A lawsuit has been filed again	nst you.
Civil	e on the plaintiff an answer to th	of this summons on you (not counting the day you received it) you must e attached complaint or a motion under Rule 12 of the Federal Rules of ion must be served on the plaintiff or plaintiff's attorney, whose name and
	-	rward Foundation 3
comp	1 ,0 0	ent by default may be entered against you for the relief demanded in the answer or motion with the court.
		ANGELA D. CAESAR, CLERK OF COURT
Date	;	
		Signature of Clerk or Deputy Clerk

FOIA Summons (1/13) (Page 2)

Civil Action No.

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

	This summons for (no	ame of individual and title, if any)				
was re	ceived by me on (date)					
	☐ I personally served the summons on the individual at (place)					
			on (date)	; or		
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	, a person of suitable age and discretion who resides					
	on (date), and mailed a copy to the individual's last known address; or					
	☐ I served the summ		, who is			
	designated by law to accept service of process on behalf of (name of organization)					
		; or				
	☐ I returned the sum	; or				
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty of perjury that this information is true.					
Date:		<u>-</u>	Server's signature			
			Ü			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: